



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

F3-8612-79

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
PA 1206

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Wunder Chemical Corporation		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 113 Main Street			
03 CITY Tullytown	04 STATE PA	05 ZIP CODE 19007	06 COUNTY Bucks	07 COUNTY CODE	08 CONG DIST
09 COORDINATES LATITUDE -----		LONGITUDE -----			

10 DIRECTIONS TO SITE (Starting from nearest public road)

The site location was not determined, although the address is listed as 113 Main Street in Tullytown. A visit was made to Main Street and two companies were contacted along Main Street. Neither of these companies had ever heard of this company located on Main Street. The police station in Tullytown was visited. A book there showed 113 Main Street as belonging to Meenan Oil Company, Incorporated.

III. RESPONSIBLE PARTIES

01 OWNER (if known) Unknown		02 STREET (Business, mailing, residential)			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER ()		
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		
13 TYPE OF OWNERSHIP (Check one) <input type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input checked="" type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input type="checkbox"/> A. RCRA 3001 DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103(c)) DATE RECEIVED: ____/____/____ MONTH DAY YEAR <input type="checkbox"/> C. NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input type="checkbox"/> YES DATE ____/____/____ MONTH DAY YEAR <input checked="" type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input checked="" type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION BEGINNING YEAR _____ ENDING YEAR _____ <input checked="" type="checkbox"/> UNKNOWN			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Unknown					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Unknown					

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2, Waste Information and Part 3, Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspection on time available basis) <input checked="" type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT Lori Acker	02 OF (Agency, Organization) EPA	03 TELEPHONE NUMBER (215) 597-3165	
04 PERSON RESPONSIBLE FOR ASSESSMENT Sharon E. Schaeffer	05 AGENCY NUS Corp.	06 ORGANIZATION FIT 3	07 TELEPHONE NUMBER (215) 687-9510
08 DATE 1 / 19 / 87 MONTH DAY YEAR			



IDENTIFICATION

01 STATE	02 SITE NUMBER
PA	1206

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES <i>(Check all that apply)</i>	02 WASTE QUANTITY AT SITE <i>(Measures of waste quantities must be independent)</i>	03 WASTE CHARACTERISTICS <i>(Check all that apply)</i>	
<input type="checkbox"/> A SOLID <input type="checkbox"/> B POWDER, FINES <input type="checkbox"/> C SLUDGE <input type="checkbox"/> D OTHER <u>unknown</u> <i>(Specify)</i>	<input type="checkbox"/> E SLURRY <input type="checkbox"/> F LIQUID <input type="checkbox"/> G GAS TONS _____ CUBIC YARDS _____ NO OF DRUMS _____	<input type="checkbox"/> A TOXIC <input type="checkbox"/> B CORROSIVE <input type="checkbox"/> C RADIOACTIVE <input type="checkbox"/> D PERSISTENT <input type="checkbox"/> E SOLUBLE <input type="checkbox"/> F INFECTIOUS <input type="checkbox"/> G FLAMMABLE <input type="checkbox"/> H IGNITABLE	<input type="checkbox"/> I HIGHLY VOLATILE <input type="checkbox"/> J EXPLOSIVE <input type="checkbox"/> K REACTIVE <input type="checkbox"/> L INCOMPATIBLE <input type="checkbox"/> M NOT APPLICABLE

III. WASTE TYPE	unknown
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III. WASTE TYPE				
CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

Unknown

[illegible]

V. FEEDSTOCKS See Appendix for CAS Numbers!

N/A

V. FEEDSTOCKS See Appendix for CAS Numbers			N/A		
CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

1. Directory Assistance - no listing of this company.
2. 90 Main Street and 100 Main Street (Art Kraft Container) in Tullytown.
3. Police station in Tullytown.
4. County Courthouse in Doylestown.
5. George Danyliw, PA DER



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE	02 SITE NUMBER
PA	1206 (Red)

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ B. SURFACE WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ C. CONTAMINATION OF AIR
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ D. FIRE EXPLOSIVE CONDITIONS
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ E. DIRECT CONTACT
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ F. CONTAMINATION OF SOIL
03 AREA POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ G. DRINKING WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ H. WORKER EXPOSURE/INJURY
03 WORKERS POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

01 ☐ I. POPULATION EXPOSURE/INJURY
03 POPULATION POTENTIALLY AFFECTED: _____ 02 ☐ OBSERVED (DATE _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

Unknown

ORIGINAL
(Red)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include names of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)
03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ P. ILLEGAL UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

Unknown

III. TOTAL POPULATION POTENTIALLY AFFECTED: unknown

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references e.g. state files, sample analysis reports)

1. Directory Assistance - no listing of this company.
2. 90 Main Street and 100 Main Street (Art Kraft Container) in Tullytown.
3. Police Station in Tullytown.
4. County Courthouse in Doylestown.
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